

A PRELIMINARY REPORT ON TWO CASES OF ELECTROCUTION

was made by Dr. JUDSON DALAND.

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A CASE OF BILATERAL DEAFNESS FOLLOW- ING INJURY.

J. D., married, aged twenty-six years. Was well at the time of the following accident. Three years ago fell a distance of twelve feet in a boat. He was unconscious for two hours afterward. On coming to, it was noticed that he had become completely deaf. There was a slight oozing of blood from the right ear. The deafness has continued, since the accident, without change. No other symptoms were noted afterward. He does not complain of headache, has no vertigo, pupils are equal.

Examination of the Ears negative. Careful examination with the tuning-fork fails absolutely to reveal any bone conduction. Professor MacCuen Smith reports total deafness. Patient states that he can feel sudden jars but cannot hear them. A careful examination of the eye by Dr. de Schweinitz is also negative. The case is presented because of its unique character. Unilateral deafness after falls upon the head is of course not uncommon. Bilateral deafness and especially total deafness, that is absence of bone conduction is certainly very rare. It is hardly safe to venture a diagnosis as to the seat of the lesion. Double labyrinthine hemorrhage is conceivable and perhaps possible, though certainly very improbable. Extensive basil fracture is out of the question both from the history of the case as well as the entire absence of other symptoms. Is it not possible that a minute hemorrhage occurring in the neighborhood, or in the substance of the posterior quadrigeminal bodies, may account for the condition found?

DISCUSSION.

DR. WM. G. SPILLER.—The fact that there has been no facial paralysis forbids a location of the lesion in those parts in which the auditory and facial nerves lie close together. It is difficult, also, to locate it in the medulla oblongata as the auditory centres lie so near the facial, and one can hardly assume an isolated destruction of the former from traumatism. The man has ringing in his ears which at times is severe, and may sound like a distant waterfall. This has been considered as common in labyrinthine disease. Although certain important symptoms of this affection are absent, one must remember that the patient's deafness is total, and that when this condition exists the symptoms become less severe. The absence or presence of bone conduction of sound is important in locating the process in the inner or middle ear.